ASSOCIATION OF COMMUNITY CANCER CENTERS

Annual Report

2017/18

This publication is a benefit of membership Association of Community Cancer Centers

July | August 2017

FINANCIAL ADVOCACY
BOOT CAMP

IMMUNO-ONCOLOGY
Transforming the Delivery of Cancer Care in the Community

ONCOLOGY ISSUES
A Cognitive Approach to Cancer Treatment

ISSUES
The Association of Community Cancer Centers (ACCC) is the leading advocacy and education organization for the multidisciplinary cancer care team. Approximately 24,000 cancer care professionals from 2,100 hospitals and practices nationwide are affiliated with ACCC. Providing a national forum for addressing issues that affect community cancer programs, ACCC is recognized as the premier provider of resources for the entire oncology care team. Our members include medical and radiation oncologists, surgeons, cancer program administrators and medical directors, senior hospital executives, practice managers, pharmacists, oncology nurses, radiation therapists, social workers, and cancer program data managers.

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President’s Message

Envisioning Next Gen Multidisciplinary Cancer Care

by Mark S. Soberman
MD, MBA, FACS

It has been a year of contrasts for cancer care providers. On one hand, policy and regulatory shifts threatens to diminish our patients’ access to care, and the rising cost of care threatens their financial stability. On the other, new approvals and indications, coupled with exciting advances in immunotherapies like CAR T-cell therapy, continue to expand our treatment toolkit and offer the possibility of treating patients we would not have previously been able to help. While it would be easy to be discouraged by the challenges we face, experience has taught me that when faced with challenges, we must respond with imagination, innovation, and dedication.

ACCC is a remarkable organization that comprises a large, diverse, and uniquely representative group of oncology professionals. It is estimated that ACCC members care for 65 percent of the cancer patients in the United States, and our members are engaged and passionate about issues surrounding cancer care. ACCC proactively tackles these issues by educating the multidisciplinary team about the most recent developments in cancer care.

As ACCC President, my theme has been “Envisioning Next Gen Multidisciplinary Cancer Care.” ACCC, with its focus on improving communication and collaboration among the members of the multidisciplinary cancer team, is an ideal standard bearer for this theme. Take the ACCC Institute for the Future of Oncology forum, held in July 2017. There, a multidisciplinary group of physicians, nurses, administrators, social workers, financial advocates, pharmacists, quality officers, and representatives from patient advocacy groups gathered to engage in a spirited discussion about care coordination, reconciling personalized medicine with value-based healthcare, and workforce shortages. ACCC has provided and will continue to provide a place to discuss and refine these crucial concepts.

As cancer programs continue to integrate more members into the multidisciplinary care team, ACCC develops new resources to combat growing concerns like the toll that the cost of care takes on cancer patients. Launched in 2017, the ACCC Financial Advocacy Network Boot Camp combats financial toxicity through an online learning curriculum that helps members navigate our complex and fragmented healthcare system. So far, more than 500 oncology professionals from 323 cancer programs in 47 states have graduated from the Boot Camp with the knowledge and skills necessary to help make treatment more affordable for their patients.

But ACCC’s efforts aren’t limited to education. ACCC is also a strong advocate for both patients and providers, helping ACCC members educate lawmakers on the effects of regulation and policy proposals. At Capitol Hill Day in 2017 amid talks of repealing the Affordable Care Act, ACCC brought its membership to the halls of Congress on behalf of their patients to advocate for access to healthcare, value-based care, and oral parity. ACCC also worked with CMS on its 2018 Final Rules and continued to grow its Oncology Care Model Collaborative, with 70 OCM practices meeting at the National Oncology Conference in October.

While no one has a crystal ball to precisely predict what cancer care will look like in the coming years, I know that together we are stronger, smarter, and more resilient, and ACCC will continue to be a platform for collaboration that helps us all to envision a future that creates value for and improves the lives of our patients.
## Who We Are

### New Cancer Program Members

As of March 16, 2018

<table>
<thead>
<tr>
<th>Practice/Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barbara Karmanos Morey Cancer Center</td>
</tr>
<tr>
<td>Baylor University Medical Center, Baylor Charles A. Sammons Cancer Center</td>
</tr>
<tr>
<td>Bellin Memorial Hospital, The Cancer Team</td>
</tr>
<tr>
<td>Central Peninsula Hospital, Central Peninsula Oncology</td>
</tr>
<tr>
<td>Decatur County Memorial Hospital</td>
</tr>
<tr>
<td>Franciscan Health</td>
</tr>
<tr>
<td>Franciscan Health - Michigan City - Woodland Cancer Center</td>
</tr>
<tr>
<td>Franciscan Health Crown Point - Burrell Cancer Institute</td>
</tr>
<tr>
<td>Franciscan Health Dyer</td>
</tr>
<tr>
<td>Franciscan Health Lafayette - Franciscan Health Lafayette Oncology Services</td>
</tr>
<tr>
<td>Franciscan Health Olympia Fields Cancer Institute</td>
</tr>
<tr>
<td>Georgia Cancer Center for Excellence, Grady Health System</td>
</tr>
<tr>
<td>Grand Valley Oncology</td>
</tr>
<tr>
<td>Hamilton Cancer Institute</td>
</tr>
<tr>
<td>Inova Health System, Inova Schar Cancer Institute</td>
</tr>
<tr>
<td>Inova Loudoun Hospital</td>
</tr>
<tr>
<td>Karmanos Cancer Institute</td>
</tr>
<tr>
<td>Karmanos McLaren Cancer Institute at Lapeer</td>
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<tr>
<td>McLaren Bay Karmanos Cancer Center</td>
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<td>Memorial Hospital - Gulfport, Memorial Cancer Center</td>
</tr>
<tr>
<td>Midtown Medical Center, John B. Amos Cancer Center</td>
</tr>
<tr>
<td>Otsego Memorial Hospital, Oncology Infusion Center</td>
</tr>
<tr>
<td>Providence Alaska Medical Center, Cancer Center</td>
</tr>
<tr>
<td>Seidman Cancer Center</td>
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<tr>
<td>Shaw Cancer Center</td>
</tr>
<tr>
<td>Sidney Kimmel Cancer Center, Jefferson Health - New Jersey Division</td>
</tr>
<tr>
<td>St. John Medical Center, Oklahoma Cancer Specialists &amp; Research Institute</td>
</tr>
<tr>
<td>Stephenson Cancer Center</td>
</tr>
<tr>
<td>The University of Toledo Medical Center, Eleanor N. Dana Cancer Center</td>
</tr>
<tr>
<td>Touro Infirmary, Touro Cancer Program</td>
</tr>
<tr>
<td>Trinitas Comprehensive Cancer Center</td>
</tr>
<tr>
<td>UnityPoint Health, Trinity Cancer Center Fort Dodge</td>
</tr>
<tr>
<td>University of North Carolina, North Carolina Cancer Hospital</td>
</tr>
<tr>
<td>UVM Medical Center University of Vermont Cancer Center</td>
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</table>

### ACCC is...

<table>
<thead>
<tr>
<th>Practice Type</th>
<th>Count</th>
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</thead>
<tbody>
<tr>
<td>Practices and Hospitals</td>
<td>2,103</td>
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<tr>
<td>Cancer Program Members</td>
<td>689</td>
</tr>
<tr>
<td>Individual Members</td>
<td>341</td>
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<tr>
<td>System Members</td>
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<tr>
<td>Members through State Societies</td>
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<td>Total Members</td>
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</table>

<table>
<thead>
<tr>
<th>Role</th>
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<tbody>
<tr>
<td>Physicians</td>
<td>33%</td>
</tr>
<tr>
<td>Administrators, Managers, &amp; Medical Directors</td>
<td>19%</td>
</tr>
<tr>
<td>Nurses</td>
<td>11%</td>
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<tr>
<td>Billers &amp; Coders/Data Managers</td>
<td>5%</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>4%</td>
</tr>
<tr>
<td>Social Workers</td>
<td>3%</td>
</tr>
<tr>
<td>Patient Navigators</td>
<td>3%</td>
</tr>
<tr>
<td>Pharmaceutical Representatives</td>
<td>4%</td>
</tr>
<tr>
<td>Financial Advocates</td>
<td>3%</td>
</tr>
<tr>
<td>Radiation Therapists</td>
<td>2%</td>
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<tr>
<td>Other Multidisciplinary Cancer Team Members</td>
<td>6%</td>
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</table>
2017 was a big year for transitions in Washington, with a new Administration and new leaders—and agendas—in Congress. ACCC’s advocacy efforts remained focused on policies that would preserve and enhance access to quality cancer care for patients in their communities. This past year, ACCC:

- Advocated with our members to influence legislative change. ACCC attendance at our 2017 Capitol Hill Day reached a record high, with 65 ACCC members representing 143 districts in the United States. In the middle of Congressional debate over repeal of the Affordable Care Act (ACA), ACCC members met with 88 members of Congress and advocated on behalf of their cancer patients for access to quality, affordable insurance coverage, a commitment to value-based care, and increased funding for the National Institutes of Health (NIH) and cancer research, as well as the Cancer Drug Parity Act of 2017 (H.R. 1409). Members secured several co-sponsors for our legislative requests.

- Led an advocacy platform for ACCC members during the debate on the 2017 tax reform bill, including sending a letter to Congress expressing strong concerns about the impact of certain provisions in the bill, regularly communicating updates to the full membership, and developing a “call to action” for members to weigh in with their representatives. ACCC’s policy team continues to monitor efforts to pass an omnibus bill and long-term government funding bill and any implications for policies that will impact our membership.

- Continued our work with the Centers for Medicare & Medicaid Services (CMS) and Congress to ensure that the implementation of the Quality Payment Program (QPP), required by the MACRA legislation, is appropriately flexible and financially workable for clinicians. ACCC submitted formal comments on the 2018 QPP proposed rule, requesting additional clarity on how the Merit-based Incentive Payment System (MiPS) adjustment would be applied, and expressed a strong need for additional time and resources to comply with new reporting requirements. ACCC continues to be very proactive on QPP implementation.

- Grew the Oncology Care Model (OCM) Collaborative, a community for OCM practices to network, share tools, and troubleshoot implementation challenges. The Collaborative has captured 85 percent of OCM practices, and ACCC hit a record high of 70 OCM practices convening at our biannual OCM workshop in Nashville in October to discuss OCM challenges and the future of value-based care in oncology.

- Led a robust advocacy effort around the CMS proposal to reduce Part B drug reimbursement for 340B hospitals. ACCC mobilized our members, collaborated with patient and provider groups, and testified before the Advisory Panel on Hospital Outpatient Payment (HOP) on both the 340B proposal and the CMS proposal to package low-cost drug administration services. ACCC continues to be very engaged in the policy conversation on 340B, which we expect will continue to heat up in 2018.
New Member-Driven Website

Last year, ACCC began a discovery process to better understand how our members were accessing resources and content on the ACCC website and to improve site usability so that member access to needed information was simple, direct, and intuitive. We listened to members’ needs, and heard the desire to have a more connected, mobile responsive, and easy-to-navigate accc-cancer.org.

Working directly with members, ACCC strengthened and modernized our online presence, resulting in the launch of our completely redesigned website in early 2018. The new accc-cancer.org includes new features calibrated to improve our members’ online experience through improved functionality so that the site displays well on any device. ACCC members are reflected throughout the new site, from the homepage to the Find a Cancer Program section to featured education programs, blog posts, and more.

The reorganized navigation, highlighted with easy-to-find links in the navigation bar, makes finding the most important ACCC content easier than ever. The new content management system also allows ACCC members to readily access targeted content related to pages they’re visiting.
The ACCCBuzz blog, which features regular updates on education projects and health policy as well as posts by guest bloggers, is now fully integrated into the site, making its content more accessible than ever.

Publications, Oncology Issues articles, blog posts, webinars, and meetings bring curated content from a variety of ACCC platforms together in a cohesive manner.

The new accc-cancer.org will be constantly evolving to meet our members’ changing needs—and those of the healthcare industry—even as members begin to enjoy the benefits of a more connected, readable, and navigable website.
In 2018, *Oncology Issues*, the official journal of ACCC, became a peer-reviewed journal in partnership with Taylor & Francis, an academic and professional publisher of scholarly journals, books, eBooks, text books, and reference works. Through this partnership, ACCC increases the visibility and reach of its world-class content within the oncology community.

As a peer-reviewed journal, *Oncology Issues* has redoubled its commitment to integrity and high standards of review. More than 275 ACCC members answered our call to indicate their interest in serving as peer reviewers for the journal and offer their insight into each article’s suitability and relevance.

The most popular articles of 2017 include:

- Peer Mentoring: A Volunteer-Run Program Benefits Breast Cancer Patients & Survivors
- The Study of High-Cost Oncology Patients to Improve Care & Curb Costs
- Preparing for Value-Based Cancer Care in a Multisite, Integrated Healthcare System
- That’s My Farmer: A Research-Based Nutrition & Wellness Program
- The Role of the Oral Oncology Nurse Navigator
- A Student Volunteer Program Takes Patient Satisfaction to the Next Level
- Building a Palliative Care Program from the Inside Out
- Implementing Telephone Triage Guidelines into Nursing Workflow
- Oncology Disease-Site Process Mapping: Coordinating Care Across the Continuum
- Spiritual Care of Cancer Patients

**Vital Resources for Cancer Care Providers**

**2018 Patient Assistance and Reimbursement Guide**

This annual publication provides tools and resources providers need to help patients pay for their cancer treatment.

[accc-cancer.org/2018PAG](accc-cancer.org/2018PAG)

**2017 Trending Now in Cancer Care Survey**

Conducted in 2017 in collaboration with The Advisory Board, this annual survey assists members in evaluating their own organization’s performance relative to similar cancer programs.

[accc-cancer.org/2017trends](accc-cancer.org/2017trends)
Engaging Members at Events

<table>
<thead>
<tr>
<th>Meetings</th>
<th>Participants</th>
<th>Cities</th>
<th>Sessions</th>
<th>Hours</th>
<th>Requests for CE</th>
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<tr>
<td>42</td>
<td>2,428</td>
<td>27</td>
<td>134</td>
<td>359</td>
<td>632</td>
</tr>
</tbody>
</table>

### Oncology Reimbursement Meetings
- Rochester, NY
- Richmond, VA
- Atlanta, GA

### Fundamentals of the Business of Oncology Pre-Conference
- Nashville, TN

### Oncology Care Model Collaborative Workshop
- Nashville, TN
- Washington, D.C.

### Oncology Pharmacy Education Network (OPEN) Pre-Conference
- Nashville, TN

### ACCC 34th National Oncology Conference
- Nashville, TN

### ACCC 44th Annual Meeting & Cancer Center Business Summit
- Washington, D.C.

30 Oncology State Society Network Conferences and Symposia

### Record-Breaking Attendance at the National Oncology Conference

At the ACCC 34th National Oncology Conference, held October 18–20, 2017, at the Music City Center in Nashville, TN, attendance records were shattered. Nearly 800 participants gathered to discuss the most pressing challenges and greatest opportunities across the continuum of cancer care. This year’s sessions focused on “how-to” strategies for navigating the complexities of delivering high-quality cancer care in an era of new technology, treatment modalities, and care delivery systems.

ACCC will continue to hold meetings across the country on a variety of topics and issues, including reimbursement, advocacy, and immunotherapy, and continue to facilitate learning and networking opportunities at the national and regional levels.

[accc-cancer.org/meetings]
Advancing Oncology Education

ACCC Provider Resources serve the dual purpose of identifying challenges to delivering quality oncology care and offering solutions and tools to meet these challenges head on. ACCC member programs often serve as models for practical implementation strategies to either expand existing services or create new processes to improve patient care.

2017 Education Projects:
- 2017 Trending Now in Cancer Care Survey
- Let’s Be Clear: Communicating to Improve the Cancer Patient Experience
- Managing Immune-Related Adverse Events (irAEs)
- Real-World Experience in Immunotherapy Delivery

Coming in 2018:
- Evaluating Breast Cancer Quality Improvement and Care Coordination
- Geriatric Oncology Programs: A Peer-to-Peer Reference
- Less Common Cancer in the Community – Multiple Myeloma
- Optimal Care Coordination Model – Phase II
- Overcoming Obstacles in Integrating Immunotherapy in the Community Setting

Empowering Care Teams in the Era of Immuno-Oncology

ACCC has built a network of approximately 8,000 cancer care team members actively engaged in delivering cancer immunotherapies to their patients. In 2017, ACCC helped to empower multidisciplinary teams to operationalize, implement, and optimize the delivery of immuno-oncology into practice by providing robust education and resources that reach beyond clinical knowledge and address real-life issues facing cancer care teams.

Key highlights from 2017 include:
- A 12-part webinar series discussing hot topics in immuno-oncology ranging from clinical advancements to integration strategies for the multidisciplinary team and beyond
- An immuno-oncology tumor-specific toolkit addressing biomarkers and combination therapies, supportive care elements, and reimbursement issues
- A series of Visiting Experts workshops featuring a curriculum tailored to individual ACCC program members
- Interactive and live case study programs featuring real-time consultation and expert feedback
- The ACCC Immuno-Oncology Policy Summit
- Innovator Award, featured in Oncology Issues and at the ACCC National Oncology Conference
- Immuno-Oncology: Transforming the Delivery of Cancer Care in the Community, a report detailing the latest advancements in cancer immunotherapy and summarizing ACCC’s immuno-oncology resources
Empowering Providers to Proactively Address Financial Toxicity

The results of our *Trending Now in Cancer Care* survey speak for themselves: An increasing percentage of services require pre-authorization, increasing the demand for program development and patient-centered care, as well as the responsibilities of financial advocates across the cancer care continuum.

In 2017 the ACCC Financial Advocacy Network continued development of tools and resources to support professionals involved in providing financial advocacy services for patients with cancer. The ACCC Financial Advocacy Network provides skills-based professional development materials and supports peer-to-peer networking opportunities through web forums and live meetings.

ACCC launched the Financial Advocacy Boot Camp, an online curriculum dedicated to preparing patients and providers to address the growing issue of financial toxicity. Since its launch, the Boot Camp has graduated more than 500 healthcare professionals from 323 cancer care programs and practices in 47 states and Washington, DC.

ACCC also conducted a nationwide census of cancer programs and their financial services. With more than 300 responses, ACCC was able to gather information on the education levels, experience, and job titles of those working with patients to address financial toxicity, as well as other important metrics to be published this year.

The ACCC Financial Advocacy Network looks ahead to revising and expanding the Boot Camp curriculum to address evolving health policy changes and topics like financial distress screening and cost-related health literacy.

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**Boot Camp Enrollees**

- **1,500** The number of healthcare professionals who enrolled in the ACCC Financial Advocacy Boot Camp since its launch in 2017.
- **764** The number of cancer programs represented by enrollees in the Boot Camp.
- **50** The number of states represented by healthcare professionals enrolled in the Boot Camp, in addition to Washington, D.C.
- **7,261** The total number of hours spent by Boot Camp enrollees learning how best to assist cancer patients in mitigating the financial burden of cancer treatment and avoiding financial toxicity. This amounts to over 300 days of learning!
Recognizing Excellence

2017 ACCC Innovator Award Winners

The ACCC Innovator Awards honor member programs that have exhibited forward-thinking strategic planning and developed pioneering programs and creative solutions that advance the goals of improving access, quality, and/or cost-effectiveness of cancer care. Congratulations to our 2017 winners!

Advocate Medical Group
Turning on the Light Switch: A Model Immunotherapy Program at an Oncology Practice

Aurora Health Care, Aurora Cancer Care
Now Playing! Drug-Specific Videos Improve Chemotherapy Patient Education

Carolinias HealthCare System, Levine Cancer Institute
Wheels Up—Bringing Lung Cancer Education & Screening to Rural Patients

Duke Cancer Institute
Come Together: A Health Disparities & Equity Cancer Program Built on Community Collaboration

Loma Linda University Cancer Center
A Perfect Fit: Mentoring Experienced RNs to Meet Oncology Clinic Demand

Northwest Medical Specialties, PLLC
Designed for Success: A Research-Based Approach to Meet OCM Requirements

Penn Medicine Virtua Cancer Program
Beyond the Classroom: Students Improve Access to Supportive Cancer Services

University of Alabama at Birmingham Comprehensive Cancer Center
Patient Care Connect—Lay Navigators Improve Quality & Reduce Cost of Care

University of South Alabama, Mitchell Cancer Institute
An Acuity Tool to Optimize Nurse Navigation Caseloads

2017 ACCC Individual Awards

Annual Achievement Award
Barbara L. McAneny, MD, FASCO, MACP
Albuquerque, New Mexico

Clinical Research Award
Raymond U. Osarogiagbon, MBBS, FACP
Memphis, Tennessee

David King Community Clinical Scientist Award
Sanford Health Clinical Research Team
Sioux Falls, South Dakota
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Catherine Brady-Copertino, BSN, MS, OCN

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Thomas L. Whittaker, MD, FACP
Cecilia R. Zapata, MS, MHA
The Statement of Financial Position shows total cash (including investments) of $6,490,844. At the end of the year, the unrestricted net assets were at $922,670 and the temporarily restricted assets at $8,755,805. The temporarily restricted amount represents commitments that have been made to ACCC as of June 30 that are either paid or are in sponsorship receivable and the project will take place at a future date. The Statement of Activities and Change in Net Assets shows total unrestricted net assets at year-end of $922,670, down from $1,057,134 at the beginning of the year. Lower sponsorships for the national meetings and money spent on getting the Oncology Care Model Collaborative started caused this loss. Financial statements for the fiscal year ended June 30, 2017, are provided.

Amendments to the budget for the purpose of conducting special projects in conjunction with the Corporate Development Committee have been approved for fiscal year 2018. The Finance Committee approved budget amendments for up to $10,320,000 of revenue with associated direct project costs of $9,804,000. Funding commitments as of December 31, 2017, for the 2018 fiscal year total more than $8,500,000, with associated project costs estimated at $8,075,000.

### Statement of Financial Position as of June 30, 2017

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<th>Assets</th>
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<tbody>
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<td><strong>Current Assets</strong></td>
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<tr>
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<td>Investments</td>
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<td>Accounts Receivable</td>
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<td>Prepaid Expenses</td>
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<td><strong>Total Current Assets</strong></td>
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<td><strong>Fixed Assets</strong></td>
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<td>Development of New Website</td>
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<tbody>
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<td>Membership Dues</td>
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<td>Other</td>
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</tr>
<tr>
<td><strong>Total Current Liabilities</strong></td>
<td>1,283,303</td>
</tr>
<tr>
<td><strong>Long Term Liabilities</strong></td>
<td></td>
</tr>
<tr>
<td>Deferred Revenue</td>
<td></td>
</tr>
<tr>
<td>Membership Dues, Net of Current Portion</td>
<td>13,200</td>
</tr>
<tr>
<td><strong>Total Liabilities</strong></td>
<td>1,296,503</td>
</tr>
<tr>
<td><strong>Net Assets</strong></td>
<td></td>
</tr>
<tr>
<td>Unrestricted</td>
<td>$ 922,670</td>
</tr>
<tr>
<td>Temporarily Restricted</td>
<td>8,755,805</td>
</tr>
<tr>
<td><strong>Total Net Assets</strong></td>
<td>9,678,475</td>
</tr>
<tr>
<td><strong>Total Liabilities and Net Assets</strong></td>
<td>$ 10,974,978</td>
</tr>
</tbody>
</table>
Statement of Activities and Change in Net Assets for the Year Ended June 30, 2017

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership Dues</td>
<td>$ 875,857</td>
<td>-</td>
<td>875,857</td>
</tr>
<tr>
<td>Conference and Meetings</td>
<td>530,407</td>
<td>376,000</td>
<td>906,407</td>
</tr>
<tr>
<td>Journal</td>
<td>293,279</td>
<td>136,000</td>
<td>429,279</td>
</tr>
<tr>
<td>Interest</td>
<td>8,824</td>
<td>-</td>
<td>8,824</td>
</tr>
<tr>
<td>Other</td>
<td>88,285</td>
<td>60,500</td>
<td>148,785</td>
</tr>
<tr>
<td>Provider Access and Education Projects</td>
<td>23,170</td>
<td>6,768,775</td>
<td>6,791,945</td>
</tr>
<tr>
<td>Net Assets Released from Donor Restrictions</td>
<td>8,805,995</td>
<td>(8,805,995)</td>
<td>-</td>
</tr>
<tr>
<td>Total Revenue</td>
<td>$10,625,817</td>
<td>1,464,720</td>
<td>9,161,097</td>
</tr>
</tbody>
</table>

Expenses

<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conferences and Meetings</td>
<td>$ 1,113,519</td>
<td>-</td>
<td>1,113,519</td>
</tr>
<tr>
<td>Journal</td>
<td>469,421</td>
<td>-</td>
<td>469,421</td>
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<tr>
<td>Membership</td>
<td>448,011</td>
<td>-</td>
<td>448,011</td>
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<tr>
<td>Other</td>
<td>45,041</td>
<td>-</td>
<td>45,041</td>
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<tr>
<td>Provider Access and Education Projects</td>
<td>7,835,885</td>
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<td>7,835,885</td>
</tr>
<tr>
<td>Total Program Services</td>
<td>$9,911,877</td>
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<td>9,911,877</td>
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<tr>
<td>Supporting Services</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>General</td>
<td>$ 848,404</td>
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<td>848,404</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>$10,760,281</td>
<td>-</td>
<td>10,760,281</td>
</tr>
</tbody>
</table>

Change in Net Assets                          | $(134,464)     | (1,464,720)            | (1,599,184)|

Net Assets, Beginning of Year                 | $1,057,134     | 10,220,525             | 11,277,659|

Net Assets, End of Year                       | $ 922,670      | 8,755,805              | 9,678,475 |
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